

A study of the benefit of the implementation of a HIV/AIDS policy at Daveyton high schools

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*Assignment presented in partial fulfilment of the requirements for the
degree Master of Philosophy (HIV/AIDS Management) at Stellenbosch
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March 2012

DECLARATION

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March 2012

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Abstract

This paper outlines the aspects of the implementation of HIV/AIDS Policy in Daveyton Schools. It reveals the implementation of HIV/AIDS Policy in schools and in doing so it will help employees to be protected with the greatest rates of infection.

The research sought to document the experience of high schools in managing HIV/AIDS burden and to draw out possible lessons and best practices from within the government sector. This I hope, will complement and add the current set of best practices that have been based mainly on the experience of other institutions with more extensive resources to manage the risk of HIV/AIDS.

It is very important that whatever results are discovered, the intervention needs to be done to make sure that there is a progress in dealing with HIV/AIDS as a problem. It is still common that again that people who are infected and affected are still discriminated and stigmatized against by other people. This is because HIV/AIDS awareness, campaigns and training on many issues of HIV/AIDS are offered but there are no follow up done to see to it if there is implementation and change of behavior from people, who were addressed, trained or workshopped.

Opsomming

Hierdie studie fokus op die implementering van 'n MIV/Vigsbeleid vir skole in Daveyton.

Die studie ondersoek en dokumenteer die implementering van MIV-programme in skole en die algemene probleme wat daarmee gepaard gaan.

Redelike lae kennisvlakke is binne skole gevind en daar word tot die gevolgtrekking gekom dat daar baie ruimte vir verbetering is ten opsigte van die doeltreffende bestuur van MIV/Vigs binne skole.

Gevolgtrekking en voorstelle vir die beter hantering van die pandemie binne skole word bespreek en sekere praktiese voorstelle word aan die hand gedoen wat deur skole geïmplementeer kan word.

Acknowledgement

I would like to express my sincere thanks and appreciation for the following people for their assistance and support. My supervisor Prof. JCD Augustyn for his guidance, motivation and support towards my study. Mr Mojalefa Tulare who work for The Gauteng Department of Education to conduct interviews in Daveyton High Schools, my husband Charles, my son, Zamani and my daughters Ayanda, Nomshado and Bongiwe for their support during my study. Not to forget my late supervisor G. Eva who passed on in August 2011, may his soul rest in peace. Above all I thank the almighty God for everything.

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CHAPTER 1 INTRODUCTION

In order to control the HIV/AIDS epidemic a lot of determination, perseverance and commitment as at present there is still a struggle for the cure. The effective management of HIV/AIDS in the workplace is critical in reducing the negative consequences of the epidemic to the government sector.

Generally, Gauteng Department of Education (GDE) employees are infected and affected by HIV/AIDS. The effective management of HIV/AIDS in the workplace is critical in reducing the negative sequences of the epidemic to the education sector. Before employees took HIV/AIDS as a curse, that is why there is stigma and discrimination around HIV/AIDS. GDE employees need to be educated and trained how to develop HIV/AIDS policy and the policy need to be implemented not to decorate shelves. Employees need to be clear about their benefits and HIV/AIDS legislation. The policy will help to give strategic direction in the management of HIV/AIDS in schools.

Instead of being an arm of implementation of policies training of employees in HIV/AIDS must become an integral aspect and tool of formulating and evaluation. It is important that as many role players as possible are exposed to the programme. Employees must be equipped with necessary skills and talent that is not common.

The decision to do this study was, employee need to be responsible for initial developing and supporting the HIV/AIDS policy and programme. The original hypothesis for the study was “if the implementation of HIV/AIDS legislation in the workplace is not done properly employees will perish”. The Act must be thoroughly explained and its procedure must be followed, whenever there is an occurrence of incidences.

All employees from top to bottom should have the right to lodge complain and be fully attended to. Information must reach every employer.

There should be no omission and no costs savings on the expense of someone else well-being. Threatening statement should be avoided to stop any sentence punishment. Employees also need to be provided with more HIV/AIDS legislation information in order to develop. Daveyton Schools are in a disadvantage area. Employees can experience HIV- related discrimination from employers, supervisors or other employees.

The purpose of this study was to get research on:

- a. The laws protecting people living with HIV/AIDS in the workplace
- b. Common questions around HIV/AIDS and employment issues
- c. How to stand up for your right at work.

There are seven important laws in South Africa and they are as follows:

- a. The Constitutional (Act 108 of 1996)
- b. Employment Equity Act No. 55 of 1998 (EEA)
- c. The Labour Relations Act No. 66 of 1995 (LRA)
- d. The Occupational Health and Safety Act No. 85 of 1993 (OHSA)
- e. The Compensation for Occupational Injuries and Disease Act No. 130 of 1993 (COIDA)
- f. The Basic Conditions of Employment Act No. 75 of 1997 (BCEA)
- g. Medical Scheme Act (MSA)

All the above mentioned acts protect the rights of people living with HIV/AIDS. Employees must stand up for rights at work. They can take disputes on issues like dismissals or discrimination to a Bargaining Council or the Commission for Conciliation, Mediation and Arbitration (CCMA).

Employees are not aware that they can appeal against decisions on the Labour Court by going to Labour Appeal Court. Employees must contact the CCMA or BC within 30 days of being unable to resolve their dispute.

This research provides an overview of research methodology, a literature review of the implementation of the HIV/AIDS policy in Daveyton High Schools and the benefit of all

employees. In order for this research to be a success the literature had to be reviewed. The review of the literature will be presented in Chapter 2.

CHAPTER 2 REVIEW OF LITERATURE

“The way in which employees with HIV/AIDS are treaded in the workplace has a multitude of legal implication. These extend from the highest level, the Constitution, right the way down to a shop-floor agreement between employer and employees. As with all laws, its boundaries have to be tested through the court, legislation and the way it is applied will continue to evolve to meet our changing knowledge and understanding of the epidemic.” (Whiteside Alan and Sunter: (2002) pg. 157)

2.1 The Legislation

The South African Constitution (Act 108 of 1996) in the Supreme Law of the country and all other laws must comply with its provision. The Bill of Rights within the Constitution set out a number of rights which protects employees. As a result the government has, amended certain laws and introduced new pieces of legislation to ensure that our labour laws are consistent with the Constitution.

There are seven important laws in South Africa. They are as follows:

- a. Employment Equity Act No. 55 of 1998 (EEA)
- b. The Labour Relations Act No. 66 of 1995 (LRA)
- c. The Constitutional (Act 108 of 1996)
- d. The Occupational Health and Safety Act No. 85 of 1993 (OHSA)
- e. The Compensation for Occupational Injuries and Disease Act No. 130 of 1993 (COIDA)
- f. The Basic Conditions of Employment Act No. 75 of 1997 (BCEA)
- g. Medical Scheme Act (MSA)

All the above mentioned acts protect the rights of people living with HIV/AIDS.

According to Employment Equity Act No. 55 of 1998 (EEA). It ensures the equality and non-discrimination in the workplace that is through anti-discrimination measures affirmative actions (equality provisions). Section 5 of this act promotes equal opportunities by eliminating unjust discrimination, directly or indirectly. This is referring to any employee in any employment policy is practice, on one or more grounds, including

race, gender, sex, pregnancy, marital status, family responsibility, ethnic or social origin, colour, sexual orientation, age, disability, religion, HIV status, conscience, belief, political opinion, culture, language and birth.

According to the Bill of Rights, provides every person with the right to equality and non-discrimination, privacy, fair labour practices and access to information. The rights to privacy that suggests and implies an employees' right to confidentiality regarding medical information including HIV status. In the employment Equity Act, HIV/AIDS is referred to but there are provisions in all other Acts that are relevant to HIV/AIDS. There is another legislation that is the Medical Scheme Act No 131 of 1998 and Common Law Protection of the right to privacy and dignity. These are other legislations and protection, which are within the common law that protects an individual's personality rights. South Africa is a signatory to a number of International Labour Organization (ILO), Convention III on Discrimination (Employment & Occupation) 1998. The one, which specifically relates to HIV/AIDS in the workplace, is the South African Development Community (SADC) Code on HIV/AIDS and Employment, which was approved by Council of Ministers in September 1997.

According to the Labour Relation Act No 66 of 1995 (LRA) Sections 185 of the Act protects employees against arbitrary dismissal. It is stated that the dismissal is just, if it is related to an employees' conduct or is based on the employer's operational requirements. All dismissal needs to be effected with reference to the code of good practice. In the case whereby the employee has no longer has the capacity to perform his/her duties the employer should:

- a. Investigate the extent of his/her incapacity.
- b. Investigate alternatives, short of dismissal such as short time, extended sick leave without pay.
- c. Investigate adapting the employee's duties and investigate accommodation of employee's disabilities. The employee must be given an opportunity to voice their opinion on the possible alternatives or accommodation. An employee must be provided with an incapacity hearing before dismissal.

According to Occupational Health and Safety Act No. 85 of 1993 (OHSA)

Section 8(1) requires employers, as far as reasonably practicable to create a safe working environment. The employer has to ensure that:

- a. Steps are taken to assess the risk of occupational HIV infection.
- b. The risk of positive HIV infection is minimized.
- c. Staff training is undertaken on safety steps to be taken following an accident.
- d. Universal infection control procedures are used in any situation where there is a possible exposure to blood or blood products. Employers should make sure that appropriate first aid equipment is available to deal with blood and body fluid. The employees should receive proper training on universal infection control procedures. The occupational transmission of HIV/AIDS should be placed on the agenda of the Health and Safety Committee to ensure that correct control measures are followed.

According to Compensation for Occupational Injuries and Diseases Act No. 130 of 1993 (COIDA), Section 22(1) provides for compensation for employees who are injured in the work place, provided such injury causes disablement or death. Compensation is this possible in accordance with the Act where an employee becomes HIV infected following an occupational exposure to infected blood and blood products in accordance with information received from the compensation commission, within the department of labour, the success of a claim for compensation is likely to be reliant on the procedures which were followed immediately following an accident as it will be necessary to show that the occupational accident was the direct cause of the person sero-converting i.e. becoming HIV positive.

This requires consideration of the following issues:

- a. Whether accident protocol exist on occupational exposure to blood or bodily fluid.
- b. Whether the employer offers HIV testing to all people after an occupational accident.

- c. Whether procedures are in place to deal with situations where an employee refuses to undergo HIV testing.
- d. Whether post exposure prophylaxis (paid for by the employer) is provided to employees whether a serious risk of HIV transmission exists.

According to the Basic Conditions of Employment Act No. 75 of 1997 (BCEA). This Act sets out the minimum employment standards for working hours, leave etc. It states in section 22 that every employee is entitled to six-leave cycle. Furthermore in accordance with section 22(6) provision is made to negotiate an extension of sick leave but at reduced rate (provided is not less than 75% of the ordinary rate of pay). Employees need to establish policies regarding extended sick leave and leave for other reasons

Medical Scheme Act No. 101 of 1998 provides that a medical scheme may not unfairly discriminate, directly or indirectly against any person on the basis of his or her HIV status, in accordance with section 24(e) and section 29(n) of the Medical Schemes Act 131 of 1998. Furthermore such a scheme must offer a minimum level of benefits to employees with HIV/AIDS as prescribed by the

Minister of Health in terms of section 67(g) of the Medical Schemes Act. Schemes will therefore no longer be able to discriminate against people with HIV/AIDS. This Act came into operation on 1st September 1999. The Medical Schemes Act regulates Medical Schemes not employers, but the regulations have implications due to the fact that most employment contracts include some medical cover. (HIV/AIDS and the Law Manual)

2.2 Policies

The most important policy is the “code of good Practice a Key aspects of HIV/AIDS and Employment”. The Minister of Labour and the Employment Equity Commission developed this policy. The code is a policy, not a law, but much of what it says is covered in this research.

This Code encourages employers to develop their own policies to:

- a. Prevent unfair discrimination at work on the basis of employees' HIV status.
- b. Encourage people living with HIV or AIDS to be open about their HIV status without fear.
- c. Find ways of managing HIV/AIDS in the workplace.
- d. Create a balance between the rights and responsibilities of everyone at work.
- e. The following are the methods used to conduct the research.

The code says, unfair discrimination on the basis of HIV status is not allowed. No one can unfairly discriminate against you because of your HIV status at work, or when you apply for a job. This means (among other things) that, your HIV status cannot be taken into account when an employer decides whether or not to hire you. People living with HIV/AIDS cannot be paid less, given less benefit, nor have different terms and conditions of employment from other employees in same category as them. People living with HIV/AIDS cannot be forced to use separate facilities such as toilets and showers.

2.3 Cases

A v SAA

J 1916/99

The AIDS Law Project (ALP) dealt with the case where a person applied for a job as a cabin attendant with South African Airways (SAA). SAA refused to hire him because he had HIV. In court, SAA admitted that testing him without his informed consent and refusing to employ him because he had HIV was “unjustifiable”. A settlement including a payment of R100 000 to the person, was drawn up.

Hoffman v SAA

2001 (1) SA 1 (CC)

In Hoffman v SAA the Constitutional Court declared that pre-employment HIV testing was a violation of a worker's rights to dignity and equality.

2.3.6 What can be done to prevent unfair discrimination?

Employers and employees should try to protect workers with HIV or AIDS from unfair discrimination and victimization by, education and training on basic human rights as well as providing the rights of workers who have HIV or AIDS, supporting workers with HIV/AIDS in order to make it possible for more people to be open about their HIV status and have HIV testing at work. HIV test is a medical procedure, informed consent should be given to be tested. That means one needs to know exactly what the test is and what the consequences will be for him/her if tested positive or negative. To know this, one should be given counselling before the test (“pre-test counseling”).

Pre-test counseling should give enough information to properly decide whether or not a person wants to have the test. One must then be given time to decide whether to have the test or not.

During the ordinary scope of employment and employer cannot ask you to have an HIV test unless the Labour Court has given them permission to do so. Even so, if you refuse to have the test, you cannot be forced to.

However if you decide to have an HIV test at a clinic run by your employer, this is not against the law. You may decide to have a test at work because you want to know, or because you may have been involved in a workplace accident that may have exposed you to HIV.

If you do agree to have a test, you must be given counseling when the results are given back to you, to help you deal with the meaning of the results. This is called “post-test counseling”.

2.3.2 The result of an HIV test is confidential

Because you have the right to privacy, you do not have to tell anyone what your HIV status is, even if you have the test at the clinic at your workplace. This includes your

employer and your fellow workers. If you do choose to tell your employer, your employer cannot tell anyone else unless you agree to it.

Greater openness about and discussion of HIV will help to prevent HIV transmission and end the victimizations and stigmatization that people with HIV face. Employers should create an environment at work where people can be free to disclose their status if they want to.

Some ways to do this are, employing people who have HIV or AID in education, prevention and awareness programmes (for example, as “peer” educators). Encouraging support groups for employees with HIV or AIDS. Ensuring that persons who are open about their HIV status are not unfairly discriminated against or victimized.

2.3.3 Making the workplace safe

Employers must make sure the workplace is safe and that risk to the health of employees is minimized. While the risk of being infected with HIV at work is very low, accidents do happen. There should therefore be training and education on how to deal with and reduce the risk of HIV transmission at work.

Workers especially health care and emergency workers, should be given equipment and materials (such as disposable gloves) to protect them from exposure to bodily fluids.

Employers should state in their policies, procedures that must be followed in the event that a worker is exposed to HIV, as well as how to get treatment.

Anti-retroviral drugs, known as PEP (post exposure prophylaxis) can reduce the risk of being infected with HIV if you have been recently exposed to the virus. To be effective these drugs must be taken within 72 hours of the accident where there may have been a risk of HIV infection.

2.3.4 Compensation at work

Workers who are infected with HIV as a result of a workplace accident can apply for compensation for their medical expenses. An employer's policy should say how workers go about claiming compensation. Employers must also assist workers to prove they were infected as a result of a workplace accident (by collecting the relevant information and documentation).

2.3.5 Employees' benefits

Workers with HIV have the right to receive the same employee benefits as all other workers. Depending on where you work, the benefits offered by your employer may be: Medical aid, Disability and /or death benefits, Pension or provident funds. One should remember that all employees are entitled to sick leave under the Basic Condition of Employment Act.

2.3.5 Grievance procedures

Employers must protect the rights of workers with HIV/AIDS. They must make sure that there are grievance procedures to deal with cases where the rights of workers with HIV/AIDS are violated these procedures must protect your right to privacy, including hearing complaints in private and keeping information confidential.

2.3.6 Managing employees who have HIV

Employees with HIV must be allowed to do their job for as long as they are medically fit to do so. Where employees with HIV or AIDS get sick, employers must try to assist them to continue working. This is known as "reasonable accommodation".

2.4 HIV and AIDS workplace programmes

Programmes should be developed at work that will help to prevent new infections, provide care and support for those infected or affected, as well as manage the impact of the HIV epidemic on the organization. These programmes could include:

Education and training programmes to raise awareness and knowledge of HIV/AIDS, promoting the use of condoms and respect for social rights, providing access to voluntary counseling and HIV testing and treatment.

Many employers now provide anti-retroviral treatment to employees. Anti-retroviral drugs do not cure HIV, but they help you to remain healthy and continue working.

As an employer there are many ways of protecting your rights at work for example, if you are discriminated against because you have HIV or AIDS, you could lodge a complaint with the South African Human Rights Commission (SAHRC) or you could sue (bring a case against) your employer. However the Labour Relation Act (LRA) and the Employment Equity Act (EEA) have easier, quicker and cheaper ways of ensuring your rights are protected.

The LRA says that any disputes about work issues (such as unfair dismissals or unfair discrimination) will be dealt with by Bargaining Councils or by the Commission for Conciliation, Mediation and Arbitration (CCMA).

However, the EEA is even easier to use because (unlike the LRA) it explicitly says you cannot be unfairly discriminated against because you have HIV or AIDS.

Unfair discrimination includes unfair testing Dismissal, Refusal to give you training or promotion. (AIDS Law Project: HIV/AIDS Current Law & Policy)

CHAPTER 3 RESEARCH METHODOLOGY

The study conducted in depth case studies of thirteen randomly selected schools.

The study was developed through the use of qualitative research techniques. Qualitative approach was the method that gathers information about issues that were not measurable. Two instruments were used to collect information or data in this approach: interviews and workshops or focus groups.

Qualitative approach is according to Neuman (1997: 327) states that research approaches differ on several; ways they are complimentary qualitative approach is an approach that all social researchers systematically collect and analyses empirical evidence to understand and explain social life, objectives for research and ways to deal with data that that are often at odds with qualitative approach.

It is a method that gathers information about issues that are not easily measurable or accountable. Words and sentences are used to qualify and record information about the world in this research approach and according to David Nachmias (1992-4th edition:271) states that qualitative approach enables scientists to gain an emphatic understanding of social phenomena, and they must recognize both the historical dimension of human behaviour and subjective aspect of the human experience.

Qualitative research attempts to understand behaviour and institutions by getting to know the person involved and their values, rituals, symbols beliefs and emotions. Applying such a perspective one would for example, study HIV/AIDS policy by immersing oneself in the life of the employees rather than collecting data with a structured interview schedule. Therefore the following are the advantages of the focus group approach i.e. qualitative approach. The following key point plays a role.

3.1 Methods

3.1.1 Surveys

Surveys were used in this research as it gives the statistical level of the implementation of HIV/AIDS Policy and employees benefits, and the fact that most of our respondents may have not been knowledgeable about HIV/AIDS policy. The interview closed the gap which the questionnaire was unable to close.

According to Christensen (2004) a survey is often defined as a method of collecting standardized information by interviewing a representative sample of some population. In other words, the surveys represent a probe into a given state of affairs that exists at a given time. Therefore direct contact must be made with the individuals whose characteristics, behavior, or attitudes are relevant to the investigation.

The descriptive research techniques provide a picture of a particular situation and try to describe the relationship that exists between variables. In this case the implementation of HIV/AIDS policy (independent variable) is manipulated and the benefit of all employees (dependent variable) is passively observed. The implementation of HIV/AIDS policy is independent variable, because temporally precede dependent variable. The independent variable is the one which is a causal factor. We can only measure dependant variables. Dependant variables are associated with experimental research.

There were variable that could correlate with the implementation of legislation. The policy could be developed because schools or principals want to keep abreast with current schools' or principals' practice. It could be the instruction from the management. It could be done because it was a request in the workplace as it was needed during auditing or whole school evaluation.

A written survey is an excellent way of accessing the thoughts of large number of people. Generally a survey is completed anonymously by the respondents.

3.1.1.1 Advantages

A number of advantages accompany the use of a survey. Many people can be reached at less cost than that required to interview them. If properly constructed, a survey is easy to score and analyse. Also respondents have time to think about their answers whereas in personal or phone interviews they are expected to answer quickly. In addition, there is a great public relations value attached to a survey.

3.1.1.2 Disadvantages

There are also several disadvantages associated with a survey. The main disadvantage is that it is extremely difficult to create a survey that is right for public consumption. Items or questions must be stated very carefully. A printed survey is not an interactive tool. An interviewer cannot converse with a respondent, clarifying as necessary and requesting and requesting additional information. This characteristic has important implications. For one thing, survey items that are incorrectly stated can generate false data. Also, there is no opportunity to ask the respondent to go beyond the printed items to clarify. The physical layout of a survey is important. For example, inadequate white space can make the form so unappealing or overwhelming in appearance that people do not want to complete it.

3.1.2 Interviews

An interview allows people to interchange questions with one another to obtain additional information. It is a direct method of obtaining information from a participant who is asked to answer questions. There are three types of interviews, the structured, unstructured, and semi structured. According to Earl Babbie 8th edition 1998 the practice of social research “an interview is an interaction between an interviewer and a respondent in a plan of inquiry, but not a specific set of questions that must be asked in a particular order. It is essentially a conversation in which the interviewer establishes a general direction for the conversation and pursue specific topics raised by the respondent and the respondent does most of the talking.

3.1.2.1 Advantages

There are many advantages for using an interview to get information. The most important advantages are:

- a. The interviews are free to expand on the topics relate their own experiences.
- b. Interviews can serve as a guard against confusing questionnaire items.
- c. The interviewer can observe the respondent behavior and attitudes while asking questions.
- d. It allows the discovery of new aspect by investigating some explanation given by respondents.
- e. It allows interviewer to interview an individual or group of people at a time.

3.1.2.2 Disadvantages

On the other side there are disadvantages to use this method. They are as follows:

- a. The interview is likely to take more time than necessary and be unpleasant.
- b. It sometimes difficult to take all the information from a respondent they may introduce many biases.
- c. It is not standardize.
- d. It requires high level of skills

3.1.3 Questionnaires

It is the most structured way of gathering information. According to J.C. Wellman and S.J. Kruger on Research Methodology for Business and Administrative Science page 166-7 “in a structured interview the interviewer puts a collection of questions from a compiled questionnaire known as an interview schedule.” In this method the interviewer is restricted to questions that are there in order and not deviating from them.

Employees were randomly asked to complete the questionnaire. The completion of the questionnaire was voluntary, anonymous and confidential. In the questionnaire the respondents were asked to fill in their age group and gender

3.1.3.1 Advantages of questionnaires

Questionnaires are advantageous to use because of the following reasons:

- a. It minimizes the role and influence of the interviewer and enables a more objective comparison of the results.
- b. It can be without personal contact with the respondent.
- c. It helps and overcome misunderstanding and misinterpretations of words or question as the results the answers given are clear.

3.1.3.2 Disadvantages of questionnaires

There are also disadvantages of using questionnaires in research.

- a. They are costly in terms of time and money. Interviewer has to spend a certain number of hours interviewing each participant and they may travel to reach respondents.
- b. The respondents may be embarrassed by questions, which touch on confidential issues.
- c. The interview is likely to take more time than necessary and be unpleasant.
- d. It is sometimes difficult to take all the information from a respondent.
- e. Incompetent interviewer may introduce many biases.

3.1.3 Conducting an interview

When conducting an interview we need to consider the level of knowledge and the level of employment. In schools there are three levels of employment. They are as follows:

- a. The management (post level 2 and 3)
- b. The educators (post level 1) with administrators
- c. The general workers

The interview was done individually; the questions were as follow:

The management

The following questions were for managers only: Managers were asked the questions that were of their level of understanding. The Principal and the School

Management Team (SMT) were to explain how well they know their staff. They were to motivate their answers. They had to tell more about their feeling on HIV/AIDS campaign. Did the management know anything before about HIV/AIDS legislation? At present what would you say about the knowledge on HIV/AIDS legislation and Labour Law? Was there any change in terms of behavior after presentation of legislation and policy implementation? How was the treatment of people who are suspected to be HIV positive? Did anyone lodged complain on discrimination and stigmatization against their colleagues? How could you attend to the complaint of discrimination and stigmatization? The last one was, if one of your staff comes to you and tells you that she /he is diagnoses HIV positive. How would you assist him/her? How?

Educators and Administrators

Educators and administrators were given different questions from the School Management Team. Does your organization comply with legislation and labour law in terms of HIV/AIDS? Do other staff members exercise their rights? Was the implementation done properly? How would you advise your management on issues related to HIV/AIDS? Do you have HIV/AIDS policy? If yes, Who were involved in the drawing of HIV/AIDS policy? Were you happy about the representation? Among the staff, do you have people living positive with HIV? How do you treat them? Do you have support group within the organization? If no where do they go for the support?

The general workers

General workers were given questions different from the School Management Team and of the administrator and educators. The following were the questions:

How free are you to approach for help or advice concerning HIV/AIDS? How should one deal with HIV/AIDS in the workplace? Can you say other staff members exercise their rights? How would you treat an HIV positive colleague? If your friend tell you that he/she is positive, will you tell others? Is the treatment equal in terms of workplace issues? Do you know anything on health and safety act and other laws, which protect

your rights? If you were the manager for the day, what would you change? Why? If you diagnosed HIV +, how would you behave? Do you believe in positive living?

3.1.4 Why this research designs

As individual people they are given a chance to say what is in their hearts without anyone to discourage them. In this case people's views are noted down and recorded for future use. People cannot have a chance to say what they are in-groups. HIV/AIDS is a very sensitive topic or issue. So interviews must be treated with great importance. This will help to avoid future problems and they can be solved easily interviews makes a person get good insight on personal view point, than the group view point.

3.1.5 Group Discussion

The following questions were for the group discussion:

Can an employer force a job applicant to have an HIV test? Do you have the right to confidentiality at work? Can an employer demands to know if the cause of illness is HIV infection? Why? Can an employer refuse to employ you because you have HIV? Can an employer dismiss you when you have HIV but are still healthy? Is it legal to dismiss a person who has AIDS? What if other employees refuse to work with a person who has HIV or AIDS? Do your companies/schools have a workplace HIV/AIDS policy and programme? Can your employer refuse to give you employee benefits because you have HIV? Educators were chosen randomly from each school. They elaborated on the question and the scribes were noting them down. Each group compiled a report. The management was liable to provide by presenting to the whole group, the relevant and correct information. This information was noted and kept, so as to help in the next workshop on how to approach this topic or where to start on HIV/AIDS Policy.

3.1.6 Outcome of HIV/AIDS policy and HIV/AIDS legislation

People were not totally ignorant about awareness and the problem was that they did not know where to start with the HIV/AIDS and law. The employees can explain the importance of an HIV/AIDS workplace policy and they can further describe the function, content and principles of an HIV/AIDS workplace policy. They can identify the rights

reflected in HIV/AIDS workplace policies. They understand how to describe the process that can be used in developing and HIV/AIDS policy and apply this to their workplace. They can now in a position to assist with design of a new policy. They are now in a position to contribute to the monitoring and evaluation of HIV/AIDS workplace policy. They can now discuss some of the key issues and challenges facing the development and implementation of an HIV/AIDS workplace policy.

3.1.7 Why choosing this research design

This was an unstructured interview. Discussion is the best way to find out exactly and directly how the person feels and knows about certain issues, as a researcher. There was a conversation with the respondent (group) and allow the conversation to develop naturally. It is good for its flexibility. It was only when the conversation failed to cover the area that required certain information on, and to ask direct questions. As a researcher this method was chosen because it was easy to observe the respondents expression, posture, body movement and frustration. This made it to be easy to develop workshops that were suitable to the wants and needs of the employees. Many of the answers were spontaneous. They clarify their own responses.

3.1.8 Suggestion box and questionnaires

Employees were called for a short consultation and they will be informed about questionnaires that are available about HIV/AIDS issues. So what is required from the employees is to fill in the questionnaire privately and to drop them in the suggested box. The questionnaires were structured in this way:

3.1.8.1 HIV/AIDS Research

The following are instructions of the questionnaire. They were supposed to:

Tick **yes** or **no**

Fold the paper and drop it on the suggestion box.

Do not write your name

- a. Is HIV/AIDS an important topic in your organisation? Yes/No

- b. Do you believe in transparency? Yes/No
- c. Bad behaviour is the reasons for dismissal allowed by Labour Relation Act (LRA) everyone has the right to privacy and confidentiality. Yes/No
- d. Employees with HIV/AIDS have no right to a minimum level of medical aid benefits from their medical aid scheme. Yes/No
- e. Are the HIV/AIDS workshops fruitful? Yes/No
- f. Do you know anything about universal precaution? Yes/No
- g. Are the protection clothing's available? Yes/No
- h. Should care and support also cover immediate relatives? Yes/No
- i. Would you be happy if everyone discloses her/his status? Yes/No
- j. Do you regular visit VCT? Yes/No

3.1.8.2 Why choosing this method

People express themselves on suggestion box. In this method people have total privacy when using it. Employees will be advised to deposit their questionnaire in the suggestion box when no one is around. The reason for doing this is sometimes infected people (if any) will not be able to express their opinion freely but suggestion box will help that. A neutral person will be chosen to read those questionnaires and record the results. This will help because there will be no traces of handwriting by the colleagues. The gathered information will be made available for research and provision of lack of information in future. The questionnaire is general and has the same questionnaire to be answered by the whole staff. Aside a record sheet of a person scored less than 5 between 5-7 and from 8-10. People at this point should react different when faced with different problems or need clarification. The comments such as education, refresher course, monitoring and evaluation need to follow.

3.1.9 Sampling

The method will help in the installment of behavior, attitude and manner of approach when dealing with HIV/AIDS.

To construct a constructive survey a researcher had to make familiar with the problem. The survey questionnaire was given to 10 educators per school. Educators were randomly selected to complete those questionnaires. It was ensured that the sample is random means giving everyone in the targeted group a number and then using a computer to select some of the numbers in an unbiased manner.

At the beginning of the interview the interviewer had to introduce herself and explain her role. Participants need not to introduce themselves. The respondents should be given a brief overview of the topic that will be discussed. In the interest of transparency the researcher point out what is the purpose of the interview and the way the information participants contribute would be

The following skills were checked before, during and after the interview.

Before the interview

- ☐ Are you sure that the focus group or interview is the best method to obtain information for your investigation?
- ☐ Did you make contact with the people early enough?
- ☐ Did you tell each person how he/she was selected and why he/she was chosen?
- ☐ Did you give participants details about the date, time and venue of the discussion?
- ☐ If the discussion was to be a lengthy one, did you arrange for refreshments?
- ☐ Did you arrange for flip charts, pens etc?

During the interview

- ☐ Did you begin the meeting by introducing yourself and explaining your role?
- ☐ Did you let each of the participants introduce themselves?

- ☐ Did you give a brief overview of the topics that you will be discussing/
- ☐ In the interest of transparency, did you point out what the purpose of the interview is and in what way the information participants contribute would be used?
- ☐ Were you sensitive and positive? (Remember not to use the interview as an opportunity to gossip about others.)
- ☐ Did you act as a facilitator and not dominating the conversation?
- ☐ Did you avoid being directive and “pushy” about your own opinions?
- ☐ Did you avoid expressing approval or disapproval?
- ☐ Did you avoid arguing with participants? (Remember to rather take on a supportive and respectful role.)
- ☐ Did you practice good listening? (Remember you are there to gather participants’ views and ideas.)
- ☐ Did you ensure that the interview was based n open and leading questions that cover all the issues in your interview guide/
- ☐ Did you allow the conversation to flow?
- ☐ Did you facilitate so that the individual members did not feel threatened in any way?
- ☐ Did you create space for openness and an informal and relaxed discussion?
- ☐ Even the most experienced researcher won’t be able to keep track of everything that happens in the group. Did you take careful record of the subtleties, debates, relevant body language signals?
- ☐ Did you ensure that the meeting was not dominated by a few particularly assertive or aggressive individuals?
- ☐ Did you express appreciation for peoples’ participation?

After the interview

- ☐ Did you send participants a thank you not?
- ☐ Did you let participants have some indication of the outcome of the research?

CHAPTER 4 RESULTS

The study was generated to address the objectives. Random sampling was used to arrive at the selected schools. Out of 13 schools, only five schools were selected and principals were participating, deputy principals, Head of the Departments (HODs), educators, non-teaching staff and general workers. Out of 127 responses were gathered and only 13 were not completed. The results according to percentages were as follows:

The number of females was 71% and males 28%.

Findings on questionnaire

This section will give an analysis of the main findings on the questionnaire. The main findings indicate that the employees in schools have high level of HIV/AIDS knowledge. Only 2% displayed moderate knowledge level on basic policy measures, while 98% indicated high knowledge. Although the knowledge is high they still engaged in risky sexual practices. It was discovered that all schools had no written policies on HIV/AIDS for both the staff and learners. There were no schools with policies regarding confidential data and with policies or measures to aid HIV positive employees. Only 20% of schools had activities for dissemination of knowledge and understanding on HIV/AIDS and 10% of schools had community participation on HIV/AIDS.

On policies or measures to aid HIV positive employees, all schools had no policies to help all levels of employees. The results show that the majority of the employees participated in the study confirms that HIV/AIDS is an incurable disease caused by a virus and is mainly sexually transmitted. Some employees regarded their school safe from HIV infection. Their assumption was based on the “absence” of HIV positive employees in their schools, and yet they don’t encourage disclosure. Principals were aware of the rights of HIV positive employees. Significantly, the research findings indicated that the majority of schools lack employees with HIV/AIDS training, rules on safety precautions, written HIV/AIDS policies, activities for dissemination of knowledge and understanding on HIV/AIDS and first aid kits. From the findings, the major challenges identified were lack of specific objectives for HIV/AIDS education component into the curriculum. Lack of policy directive on how to handle HIV/AIDS

was mention by 100% of the respondents. Negative attitude of teachers was cited by principals. During interviews it was discovered that principals felt that HIV/AIDS education is crucial for behavior change, but took issue with the integration strategy. School Management Team or employees did not undergo training programs on HIV/AIDS.

RECOMMENDATIONS

The purpose of this study was to look at the laws protecting people living with HIV/AIDS in the workplace, common questions around HIV/AIDS and employment issues and how employees stand up for their right at work.

As a result the study recommended that the School Management Team (SMT) and the School Governing Body (SGB) members should sit down and draft a school policy on HIV/AIDS, to give them a guideline, to refer when they are faced with the problem. The drafted HIV/AIDS policy should address issues such as the rights of HIV positive learners and the staff, HIV management, prevention and creating a caring environment.

Secondly, the Department must acknowledge that workshops on HIV/AIDS education are needed and those workshops should be conducted during school holidays to enable educators to attend the trainings. School should support educators in service training on HIV/AIDS. Those educators that have got training should consider training other staff members before leaving their respective schools. It is recommended that at least one educator must have training in HIV counseling.

Thirdly, the schools need to draw up rules on universal safety precaution against HIV transmission and ensure that both the staff and learners are aware of the rules.

Fourthly, every school should get the first aid kit. The school should allocate budget for that. The principals need to stress the importance of getting first aid kits to the School Governing Body.

Fifthly, the principals must involve parents and other stakeholders in creating positive environment for HIV positive learners and staff.

Lastly, the following should be included in the curriculum of schools:

- a. The epidemiology of HIV/AIDS

- b. The history of HIV/AIDS
- c. The treatment of HIV/AIDS
- d. Prevention and care

CHAPTER 6 CONCLUSION

The analysis of the data collected in this study showed that the majority of principals have got the knowledge of HIV/AIDS. Despite their knowledge of the disease and how it can be transmitted, the schools are still lacking planned strategy. The challenges experienced by principals in HIV/AIDS education were lack of HIV/AIDS education objective and inadequate curriculum material.

The other concern is lack of awareness on universal safety precautions that should be implemented to reduce the risk of transmitting HIV. If these are observed, all schools would fight to obtain a first aid kit. It is vital that schools are prepared to accept to work and learn with positive educators and learners. This can be done by drawing an HIV/AIDS school policy, using it as guidelines in creating a non-discriminatory and caring environment for the staff and learners. Training is essential for the successful implementation of programs and policies related to HIV/AIDS in the workplace.

Management is responsible for budgeting for, designing and implementing an appropriate and effective training program consistent with the overall policy. Training should cover the basic principles of this policy and plans for communication of the policy.

Management is encouraged to promote awareness of this policy to local schools, other institutions and where considered appropriate, enter into partnerships with them in order to jointly pursue effective policies concerning HIV/AIDS prevention and treatment. Management is further encouraged to share best practices within the local schools.

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ADDENDUM

School HIV and AIDS Policy questionnaire

Name of School:.....

Address:.....

No of employees:.....

Date:.....

Section I: Basic Policy and Measures

Does your school follow the following measures?

Hiv and aids test is not compulsory for job application. **Yes** **No**

Blood test for hiv and aids is not compulsory for job applications but can be taken on a voluntary basis. **Yes** **No**

Employees may continue to work until they are no longer able. **Yes** **No**

If the answer is no for all 3 questions skip to section 3

Section 2: School's announcement of basic policy and measures

1. How does the school announce its policies?

	Yes	No
Announce to all employees		
Announce only to SMT		
Announce to some employees		
No announcement at all		

Section 3.School Policy regarding confidential data

2. Does the school have policies regarding who should have information on employees who have HIV.

No written policy

No

Yes

No. of people with confidential data

Please give their positions not their names in the table below.

Positions of people permitted to have data	Reasons why they should have such data

2. Do employees who know that they have HIV have to inform the school?

☐ No written policy

☐ No

☐ Yes.

4. What other measures does your school take towards developing a system of safeguarding confidential data ?

☐ None

☐ Yes, Please list measures

1. _____

2. _____

3. _____

Section 4: Policies or measures to aid HIV positive employees.

5. Does your school have policies or measures to help all levels of employees who have HIV?

- ☐ No (skip to section 5)
- ☐ Yes

6. What are these policies or measures? (you may answer more than 1)

- ☐ No reduction of regular benefits
- ☐ Employee rights remain the same eg. Salary increase, rights to train etc.
- ☐ Employees may change post to better suit his health.
- ☐ HIV positive employees may work with others; does not segregate
- ☐ Employees may take sick leave on doctor's recommendations when other symptoms develop.
- ☐ The above policies also cover employees who have other chronic diseases such as cancer, diabetes, hepatitis etc.

7. What are the other supportive measures your school takes to assist employees with HIV?

- ☐ Keeps them employed as long as possible
- ☐ Gives them work to supplement their income such as allowing them to take work home.
- ☐ Pays unemployment benefits according to the laws upon dismissal.
- ☐ Gives financial assistance when disabled eg. A medical expense, social security until death, continues to pay premium for life insurance, assists with funeral expenses.
- ☐ Helps their families by giving educational funds to children or employs the children and spouses
- ☐ Other, give details. _____

Section 5: Activities for Dissemination of knowledge and Understanding on Aids

8. During the past year, has School Management Team (SMT) or employees of your School undergone training programs on HIV and Aids?

- ☐ None (skip to number 10)
- ☐ Yes

9. In what manner does your school organize training on HIV and Aids?

- ☐ lectures for a minimum of 30 people
- ☐ education for small groups (less than 30)

- ☐ Peer education
- ☐ Other (give details)

10. At present, the total number of School Management Team and employees in your school is

No. of SMT

No. of employees.....

The total number of employees who have not had training on HIV and Aids is

During the past year, the number of School Management Team and employees who have undergone training on HIV and Aids is

During the past 3 years, the number of School Management Team and employees who have undergone training on HIV and Aids is

11. Does your school have a working committee on HIV and Aids?

☐ No

☐ Yes

Please give details of activities that the working committee organized within the past year.

(i).....

(ii).....

(iii).....

12. During the past year, did your school organize activities to give more education and understanding on HIV and Aids?

☐ No (Skip to No.15)

☐ Yes

13. During the past year, what educational activities and dissemination did your school organize?

Dissemination Events and Display/Distribution of Materials on HIV and Aids

- ☐ Brochures, calendars
- ☐ Posters, display of news and information on boards.
- ☐ HIV and Aids exhibitions
- ☐ HIV and Aids columns in journals and magazines
- ☐ Announcements through the intercom, videos
- ☐ Up-to-date information centers.
- ☐ Other activities (please specify)

Organizing special activities on HIV and Aids

- ☐ Information on; HIV and Aids during school's Safety Week or on other special occasions, such as school anniversary etc.
- ☐ Gave HIV and Aids information during orientation or at meetings.

- ☐ Organize competitions, such as sayings and mottos on HIV and Aids, paintings and quiz.
- ☐ Cooperates with other organizations in organizing activities.
- ☐ Visits patients giving them moral support
- ☐ Other, give details....

14. Does the school organize events to promote the use of condoms or not?

- ☐ No
- ☐ Yes. What types of events?
 - *Instructions on the correct way to use condoms.
 - *Organizer locations for free distribution of condoms.
 - *Organizes locations for the sale of condoms.
 - *Other, give details.

15. Does your school have volunteers who act as peer leaders to educate co-workers on HIV and Aids?

- ☐ No
- ☐ Yes

16. Does your school arrange counseling on HIV and Aids for employees?

- ☐ Yes
- ☐ No

17. Does your school make arrangements to assist employees in treating venereal diseases?

- ☐ Yes
- ☐ No

Section 6: Community Participation on HIV and Aids

18. During the past year, was your school involved in community participation on HIV and Aids?

- ☐ No (end of interview)
- ☐ Yes

19. During the past year, what types of community participation projects did your school organize apart from projects within the school?

<i>Community Activities</i>	<i>Average Cost</i>
<input type="checkbox"/> Raise funds/donation to help HIV and Aids patients and HIV positive persons	
<input type="checkbox"/> donated anything for Aids projects	
<input type="checkbox"/> organized activities to raise funds for Aids patients and family members on alternative skills	
<input type="checkbox"/> improved livelihood and increased ability of patients and family to be self sufficient	
<input type="checkbox"/> other, give details	

SELF-ADMINISTERED EMPLOYEE QUESTIONNAIRE

Part 1: General information of interviewee

1. Sex ☐ Male ☐ Female
2. Age Education level grade _____ Years of employment in this school---
3. Marital status:

☐ Single
☐ Married (living with spouse)

☐ Divorced
☐ Widow
4. No. of children _____
5. During the past year, have you attended training that provided Aids education and Aids prevention?

☐ Yes
☐ No
6. During the past year, have you received knowledge on Aids?

☐ Yes
☐ No
7. During the past year, did your school organize the following activities on Aids? (You may answer more than one)

Education on Aids for employees	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Send personnel to get education with other organizations	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Give brochures, calendars	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Organised events	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Announcement through intercom, videos,	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Columns in journals, magazines	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Established an information center in the school	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Organized locations to distribute condoms	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Organized Aids education on special occasions such as school anniversary	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Organized education in meetings and on orientation days	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Organized competitions eg. Sayings or mottos on Aids, paintings, answering quiz.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Cooperate with other organizations on Aids projects	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer
Organized visits to patients thus helping to increase their morale	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know	<input type="checkbox"/> No answer

8. How happy are you with Aids activities that your school is involved in?
☐Very happy ☐Happy ☐Not happy
9. Does your school have a center for information on Aids? ☐No ☐Yes
10. During the past year, have you or your friends in the school ever talked about Aids?
☐No ☐Yes
11. Does your school permit employees who have Aids virus to continue to work? ☐May
continue to work ☐Dismiss ☐Don't know
12. Does your school assist employees who have Aids? ☐No ☐Yes
☐Don't know
13. Does your school take blood test for Aids before hiring?
☐Yes ☐No ☐Don't know ☐Not sure.
14. Does your school take blood test of employees to check for HIV?
☐Yes ☐No ☐Don't know ☐Not sure
15. How happy are you with school policies and measures on Aids?
☐Very happy ☐Happy ☐Not happy.
16. Does your school have volunteers who act as leaders in giving education and
understanding on Aids? ☐No ☐Yes
17. Does your school arrange counseling on Aids for employees? ☐Yes ☐No
18. During the past year, have you ever taken sick leave? ☐No ☐Yes, total of ...days.
19. During the past year, were you reimbursed for costs of hospital care?
☐No (skip to Section 2)
☐Yes, amount reimbursed
 0 All
 0 Half of costs
 0 Part of costs
20. Where does your medical care come from?
☐ Social security
☐ Insurance (paid by government)
☐ Other ...gives details.

Part 2: Knowledge and Understanding

Please make a cross (x) in the space provided.

	Yes	No
1. People with HIV are different from Aids patients		
2. Aids virus enters through injured areas and thin linings in different parts of the body.		
3. Aids virus is found most in blood, sperm, and fluid in the vagina.		
4. Female sex organ is more susceptible to receive Aids virus than male's.		
5. Aids is a disease that is caused by habits,		
6. Blood donors can get Aids virus		
7. All babies born from women who have Aids will also have the virus.		
8. One can tell from outside appearance as to who has Aids virus.		
9. Thailand should check for Aids in all containers of blood donated.		

SECTION 3: Evaluation of Behavior

How risky do you think the following habits are in contracting the Aids virus?	VERY RISKY	RISK Y	NOT VERY RISKY	NOT RISKY AT ALL
1.Using hands to assist partner in sexual orgasm.				
2.Have sex with a person who is not a spouse without using a condom.				
3 Have sexual relations with partner using one's mouth on the partner's sexual organ.				
4.Have sexual relations where a man ejaculates outside				
5, Being close to and living every day with someone who has Aids virus				
6.Have manysleeping partners but using condoms with only some.				
7. Have sex through therectum without using condoms.				
8. Using an artificial sex organ together				

SECTION 4: Survey on One's Own Habits

The following questions are very personal. However, your answers are extremely important for this study. Therefore please read and give the truth on every question bearing in mind that this information will be kept confidential. No one will know who it belongs to as no name is requested.

1. Have you ever had sexual relations?

- ☐ No (skip to Section 5)
☐ Yes

If you have had sexual relations before, please answer the following questions by ticking () in the column you choose or add a word in the space.... Provided.

2. During the past year, have you ever had sexual relations with female/male prostitutes?

- ☐ No (Skip to No. 3)
☐ Yes

2.1. If you answered yes, how many?

- ☐ One
☐ More than One. How many.....

2.2 Every time you had sex with female/male prostitute during the past year, how often did you use the condom?

- ☐ Every time
☐ Most of the time
☐ Sometimes
☐ Hardly ever
☐ Never

3. During the past year, have you had sex with anyone who was not your spouse or prostitutes eg. Friends, boy/girl friend or fiancé or someone who you knew within a short time?

- ☐ No (skip to Section 5)
☐ Yes

If the answer is yes, please give number of people you were involved with

<input type="checkbox"/> One	<input type="checkbox"/> More than one. How many
<p>3.2 How often did you use condoms?</p> <p><input type="checkbox"/> Every time <input type="checkbox"/> Most of the time <input type="checkbox"/> Some of the time <input type="checkbox"/> Very few times</p>	<p>Who do you use condoms with?</p> <p><input type="checkbox"/> No one (skip to Section 5) <input type="checkbox"/> Every one <input type="checkbox"/> With some only</p> <p>3.2.2 During the past year, when you had sex with persons who were not your spouse or prostitute, how</p>

	<p>often did you use the condom?</p> <p><input type="checkbox"/> Every time</p> <p><input type="checkbox"/> Most of the time</p> <p><input type="checkbox"/> Sometimes</p> <p><input type="checkbox"/> Very few times</p> <p><input type="checkbox"/> Not at all</p>
--	--

PART 5: Attitudes on Aids

1. Do you know anyone who has contracted Aids virus?

- ☐ Yes
- ☐ No.

2. Do you think you can participate in the following activities with people who have the Aids virus?

Activities	Can	Cannot	Not Sure
1. Work in the same room.			
2. Use the same bathroom			
3. Eat together.			
4. Take care of them.			
5. Touch and feel.			
6. Have sexual relationship.			

3. Do you agree with the following statements?

	Yes	No	Not sure
Company should tell employees who have Aids virus.			
Employees who have Aids virus should leave work.			
Company should make blood test compulsory for all employees			
Company should allow employees to make their Own decision regarding blood test.			
Employees with Aids virus should be treated the same as others.			

4. What do you think about the following behavior?

	Agree	Disagree	Not sure
Noi is a female employee who always carries condoms.			
Sam has known Lindi only one day and was so pleased that he already had sex with her			
Pat refused to have sex with Yolanda because they did not have a condom			
I will not tell anyone if I have the virus.			
I will kill myself if I have the HIV.			

Estimates of expenditure on Aids activities

During the past year, what expenses did your organization incur on the following:

Activity	No. of personnel	Time (days)	Labor costs of personnel (estimates)	Cash in material, equipment, meetings (estimates)
1. Decision making process regarding joining projects.				
2. Personnel involved in preparing information for organization.				
3. Employees preparing individual interview forms. (i)not during work hours (no expenses) (ii)during work hours				
4.Improving policies on Aids and announcement of policies (personnel involved, hired outside organization, materials, equipment)				
5. Training on Aids 5.1 personnel involved in organizing 5.2 Employees attending training				
6.Educational activities and information on Aids 6.1Personnel involved in organizing 6.2 Employees who participated in activities during work hours.				
7. Promotion in distribution or sale of condoms (i)distribute condoms (ii)sale of condoms				
8.Promoting the treatment of venereal diseases (i)within the organization (ii)outside organization (Expenses that had to be paid regarding SDS for personnel in and outside company which can be estimated as percentage of total medical expenses if available)				
9. Counseling and advisory services.				
10. Aids participation projects.				
11. .Support given to HIV positive employees within organization.				
<input type="checkbox"/> Staff medical expenses paid by the organization. <input type="checkbox"/> Hospital staff expenses <input type="checkbox"/> Medications expenses <input type="checkbox"/> Expenses over and above insurance that organization paid <input type="checkbox"/> Health/life insurance with private insurance company <input type="checkbox"/> Payment of social insurance				

<input type="checkbox"/> Disability fund				
12. No. of people who took sick leave. No. of days.				
13. Reduced insurance premium.				